

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000486

Entity Name: ACI GROUP, INC.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

2774 N COBB PKWY
STE 109-326
KENNESAW, GA 30152

New Principal Place of Business:

2774 N COBB PKWY
STE 109 #326
KENNESAW, GA 30152

Current Mailing Address:

2774 N COBB PKWY
STE 109-326
KENNESAW, GA 30152

New Mailing Address:

2774 N COBB PKWY
STE 109 #326
KENNESAW, GA 30152

FEI Number: 58-2157873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, RONALD D
5841 COUNTY RD 209 SOUTH
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SCHMID, WAYNE E
Address: 4670 DUDLEY LN
City-St-Zip: ATLANTA, GA 30327

Title: VP () Delete
Name: SCHMID, JACK L
Address: 3980 PHILMONT DR.
City-St-Zip: MARIETTA, GA 30066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE SCHMID

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date